

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	10/03/2020 13:07
Date Of Accident	08/03/2020 07:50
Exact Location Of Accident	JURONG TOWN HALL TOWARDS JURONG EAST
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMR6131S
Insured/Policyholder	
Name Of Registered Owner	NUR & AZIZAN SERVICES
Co Reg No	5XXXXX99BB
Email Address	NORAZAN18@GMAIL.COM
Mobile Phone No	(LOCAL) +65-87548789
Alternative Phone No	OFFICE-87548789

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5115547580
Cover Note Number	

Driver

Name of Driver	AZIZAN BIN ABD AZIZ
NRIC No	SXXXX186I
Date Of Birth	11/04/1970
Occupation	INDOOR
Date Of Driving Pass	28/02/2003
Driving Experience	17 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87548789
Fax Number	
Contact Number	OTHERS-87548789
EEmail Address	NORAZAN18@GMAIL.COM

Address	BLK 773 YISHUN AVENUE 3 #01-169
Postcode	760773
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	3
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PAYA LEBAR NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 114 HOUGANG AVENUE 1 #01-1270 , POSTCODE: 530114 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2899999 - FAX NO: 62815961
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20200308/2068 & T/20200311/2117

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PC667X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLT458R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name AZIZAN BIN ABD AZIZ

Approximate Age

Injuries Sustain BODY PAIN

Injured person in which vehicle? SMR6131S

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes");
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes;
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims;
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated; or
 - (ii) for complying with requirements under any regulations, laws or court orders;



Policyholder's Signature
Date & Time

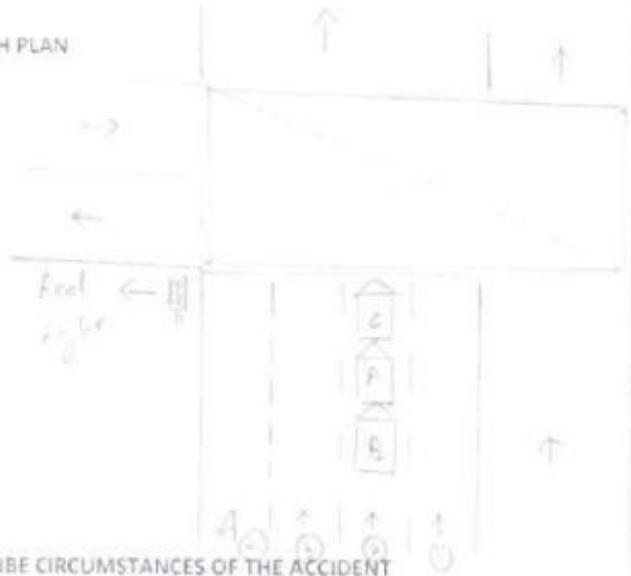
Driver's Signature
(if driver is not the policyholder)
Date & Time

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

10/03/2020
Rafiq Ahmad

Accident Sketch Plan

SKETCH PLAN



A = SMR61315
 B = PC667X
 C = SKY 458R

Jurong Town Hall Road
 towards Jurong East

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report
 Report No: T/20200308/2068
 1/20200311/2117

DECLARATION

I/We declare that the above particulars are true in every respect.



Policyholder's Signature
 Date & Time

Driver's Signature
 (if driver is not the policyholder)
 Date & Time

Reporting Centre Field Officer's Signature
 Name
 CRIC-TRF No.

10/03/2020
 Paul Wong

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20200308/2068

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

1 of 1
Report No. T/20200308/2068

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/03/2020 16:29	Video Report No.:	Station Diary No.: 27
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Informant's Particulars			
Name of Informant: AZIZAN BIN ABD AZIZ		Address: APT BLK 773 YISHUN AVENUE 3 #01-169 SINGAPORE 760773	
ID Type / ID No.: NRIC NO / S7060186I		Contact No.: Home/Office: Mobile: 87548729	
Nationality: MALAYSIAN		Email:	
Sex: Male	Age: 49	Date of Birth: 11/04/1970	Type of Informant: Driver
Race: Malay		Language:	Institution / School Name:
Occupation: Chef		Driving Licence Information: Class: 2B.3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 08/03/2020 07:50	Type of Location: Straight Road
Location: JURONG TOWN HALL ROAD towards Jurong East				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PC667X	Bus/Coach/Minibus				Slightly Damaged	0
SLT458R	Car				Slightly Damaged	0
SMR6131S	Car				Slightly Damaged	0

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20200308/2088

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

2 of 3

Report No: T/20200308/2088

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	AZIZAN BIN ABD AZIZ	ID No.	S7060186I
Related Vehicle	SMR6131S (Car)	Contact No.	87548780
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B.3 Date of Expiry: NIL
Date Treatment	08/03/2020	Date Discharge	08/03/2020
No. of Days granted Medical Leave	07	Degree of Injury	Slight

Brief Details.

On the 08/03/2020 at about 0750hrs, I was driving along Jurong Town Hall Road towards Jurong East. the traffic light turned red and I stopped. Suddenly I felt an impact from the back of my vehicle and my car surge forward knocking into a car in front of me. My vehicle's airbag was deployed. Shortly after, traffic police and ambulance came down to scene.

I was then conveyed by the ambulance to Ng Teng Fong General Hospital and was given 7days MC. I would like to add that I have an in-car camera which captured the incident.

The vehicle who knocked me was a bus (PC687X) and the vehicle that I knocked onto was a car (SLT458R).

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20200308/2068

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

3 of 3

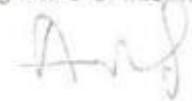
Report No: T/20200308/2068

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: F / Sgt 2 GABRIEL LEE BO WENG 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 08/03/2020 16:29
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt SHAHRUL NIZAM BIN SAMARRI Contact No.: 65476904 	Classification Of Case:
Authentication Stamp NP158	

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20200311/2117

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

1 of 3
Report No: T/20200311/2117

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/03/2020 17:32	Video Report No: T/20200308/2068	Station Diary No: 27
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Informant's Particulars

Name of Informant: AZIZAN BIN ABD AZIZ		Address: APT BLK 773 YISHUN AVENUE 3 #01-169 SINGAPORE 760773	
ID Type / ID No.: NRIC NO / S70601861		Contact No: Home/Office:	Mobile: 87543789
Nationality: MALAYSIAN		Email:	
Sex: Male	Age: 49	Date of Birth: 11/04/1970	Type of Informant: Driver
Race: Malay		Language:	Institution / School Name:
Occupation: Chef		Driving Licence Information: Class: 2B.3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 08/03/2020 07:50	Type of Location: Straight Road
Location: Along Road 1 JURONG TOWN HALL ROAD Towards Jurong East				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PC887X	Bus/Coach/Minibus				Slightly Damaged	0
SLT458R	Car				Slightly Damaged	0
SMR6131S	Car				Slightly Damaged	0

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20200311/2117

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2889999

2 of 3
Report No: T/20200311/2117

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	AZIZAN BIN ABD AZIZ	ID No.	S7060186I
Related Vehicle	SMR6131S (Car)	Contact No.	87548789
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B.3 Date of Expiry: NIL
Date Treatment	08/03/2020	Date Discharge	08/03/2020
No. of Days granted Medical Leave	07	Degree of Injury	Slight

Brief Details.

I am lodging this report vide to T/20200308/2068 and for amendment purposes.

I wish to inform that my in-vehicle camera did not capture the incident and this report is also for my insurance company purposes.

POLICE REPORT



SINGAPORE
POLICE FORCE



T:20200311/2117

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2699999

3 of 3

Report No: T:20200311/2117

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: F / Sgt 2 LOW KAI TAT 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 11/03/2020 17:32
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt SHAHRUL NIZAM BIN SAMARRI Contact No.: 65476904	Classification Of Case:
Authentication Stamp NP153	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



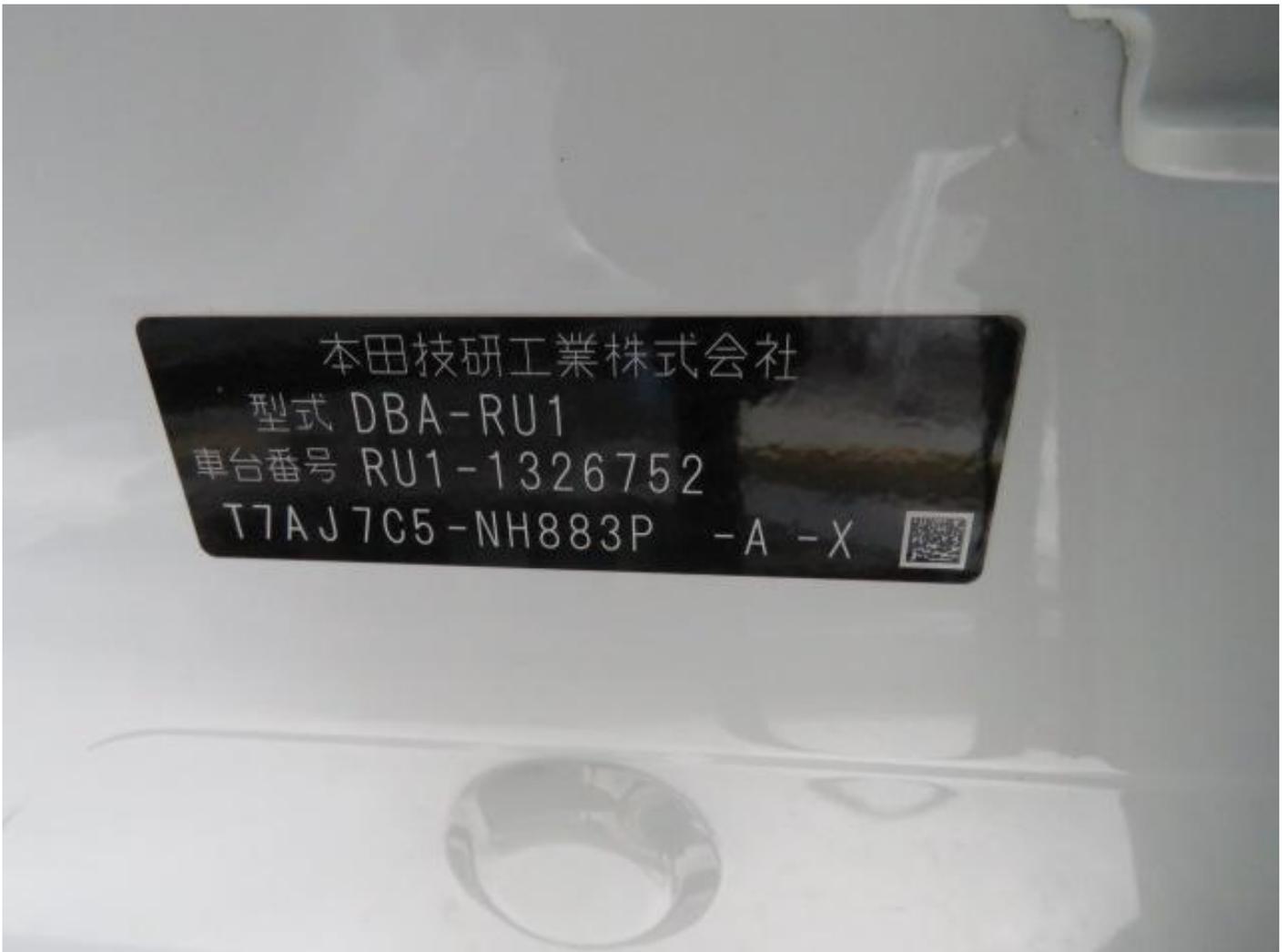
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-07 Singapore 04580
Tel: (65) 6224 0030 Fax: (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 - 17:00
UEN: S645500200 / GST Reg. No.: M410013725

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No.: MNA420050460 Vehicle Registration No.: SMR61315
Name(s) (as shown in NRIC): AZIZAN Bin Abd AZIZ NRIC/FIN/Passport No.: S70601F01
(* Vehicle Driver / Vehicle Owner) (* Please delete as appropriate
Address: B1K 773 Jalan Avenue 3, # 01-169 Singapore (700773)
Contact (Tel): - Mobile No.: 87548789
Email Address: nofazun@k@gmail.com
Date of Accident: 08/03/20 Time of Accident: 07:50
Place of Accident: Jurong Town Hall Road towards Jurong East
Insurance Company: NTUC

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Refer to police report T/20200311/2117
NO video was captured the incident

Signature of Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature: 13/03/2020
Name: Keshav Kumar
Date:

